



HABITAT FOR HUMANITY / 7 RIVERS MAINE (HFH/7RM)

126 Main Street, Suite #1, Topsham, ME 04086
Phone: 207-504-9332
Email: adam@habitat7rivers.org

F/M/P ___
R/W ___
CC ___
E ___
Opp ___
H ___

Volunteer Application

Name: _____ Date of Birth: _____

Street Address: _____ Town: _____ State: _____ Zip Code: _____

Phone: Home: _____ Work: _____ Cell: _____

Email: _____

**Note: By providing your email address, you give Habitat permission to include your email in e-newsletter distributions.

In Case of Emergency, please contact:

Name: _____ Relation: _____ Phone: _____

How did you find out about Habitat? _____

Group Affiliation (church, civic organization, none, etc.) _____

Why do you want to volunteer? _____

License(s), Certifications, Hobbies, Skills: _____

Are you interested in leading a crew _____ or being a volunteer leader _____?

Are you interested in becoming a member of a Weatherizing/Repair team that works weekly? Y ___ N ___

PLANNING AND ORGANIZATION - Committees

- ___ New Home Construction ___ Weatherizing/Repair ___ Window Production
___ Faith Relations ___ Family Services ___ ReStore

Availability: (Please indicate days and hours you are available. Example: Monday, 3:00pm. to 5:00pm)

Table with 6 columns: Monday, Tuesday, Wednesday, Thursday, Friday, Saturday. Each column has 'To:' below the day name.

New Volunteer Evaluation - Choose survey method: ___ by Phone ___ by Email ___ by Survey Monkey

Table with 5 columns: CONSTRUCTION, can lead a crew, skilled, some experience, willing to learn. Rows include Framing, Roofing, Vinyl Siding, Insulation, Hanging Drywall, Taping/Mudding, Painting, Finish Carpentry, Landscaping.

What are you limitations, if any? (i.e: fear of heights, balance, lifting, etc.)

Education

Highest Level of Education _____

Employment

Current Employer (if applicable) _____

Position/Title _____ Dates of Employment (start-end) _____

Prior Volunteer Experiences (List Organizations)

Have you ever been convicted of a crime? [If yes, please explain the nature of the crime and the date of the conviction and disposition.] Conviction of a crime is not an automatic disqualification for volunteer work.

Do you have a valid driver's license? No Yes

References: Please list two people who know you well and can attest to your character, skills and dependability. Include your current or last employer.

Name/Organization	Relationship to You	Phone number	Length of relationship

Please read the following carefully before signing this application:

I understand this is an application for and not a commitment or promise of volunteer opportunity.

I certify that I have and will provide information throughout the selection process, included on this application for a volunteer position and in interviews with HFH/7RM, that is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by HFH/7RM. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with HFH/7RM or my termination as a volunteer. I understand that as a non-profit, HFH/7RM must take necessary action to ensure that staff and volunteers are not engaged in activities that could put the mission of HFH/7RM at jeopardy or that could damage the integrity of the organization. My signature below indicates my understanding of this application, the terms and conditions of volunteering, and my authorization for a confidential background check to be completed by an authorized HFH/7RM agent. I understand that any information provided by this background check will not be made public and will remain confidential.

Signature: _____ **Date:** _____

Background Check Date: _____ Results: _____ Accepted _____ Denied _____ Contacted _____
 Owner Occupied Homes _____ Family Services _____ Office _____ RS truck _____ RS cash _____

Reference Checks

Volunteers interested in serving in areas that involve confidential information, vulnerable population, or money will be asked for the date of birth on the volunteer application and for two references who know the volunteer well and can attest to character, skills, and dependability.

Release and Waiver of Liability Form

Each volunteer is required to complete a Release and Waiver of Liability Form before his/her first volunteer experience. This Release states the volunteer desires to work as a volunteer for Habitat and engage in the activities related to being a volunteer including construction and rehabilitating residential buildings, working in the Habitat offices, and living in housing provided for volunteers of Habitat. The volunteer should freely, voluntarily, and without duress execute the Release. A new waiver will be signed once a year and at each job site. For MINORS, the parent/guardian must sign a Release along with the volunteer.

Statement of Confidentiality: It is essential that anyone affiliated with HFH/7RM has a commitment to preserve confidential information regarding our applicants, homeowners, and volunteers. Volunteers who may come in contact with this confidential information will be asked to sign a Statement of Confidentiality.

Release and Waiver of Liability

**PLEASE READ CAREFULLY!
THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!**

This Release and Waiver of Liability (the "Release") is executed on this ____ day of _____, 20____, by _____, (the "Volunteer"), in favor of Habitat for Humanity / 7 Rivers Maine, Habitat for Humanity International, Inc., and any other Habitat for Humanity affiliated organization, and their respective directors, officers, trustees, employees, volunteers and agents (collectively, the "Released Parties").

I, the Volunteer, desire to work as a volunteer for one or more of the Released Parties and engage in the activities related to being a volunteer ("Activities"). I understand that my Activities may include but are not limited to the following: working in Habitat for Humanity offices or Habitat for Humanity ReStore operations; traveling to and from work sites, towns, cities or countries; consuming food available or provided; living in housing provided for volunteers; constructing and rehabilitating residential buildings; and other construction-related activities.

I, the Volunteer, hereby freely, voluntarily and without duress execute this Release under the following terms:

Release and Waiver. I, the Volunteer, do hereby release and forever discharge and hold harmless the Released Parties and their successors and assigns from any and all liability, claims and demands which I or my heirs, assigns, next of kin or legal representatives may have or which may hereinafter accrue with respect to any bodily injury, personal injury, illness, death or property damage which arise or may hereafter arise from or is in any way related to my Activities with any of the Released Parties, whether caused wholly or in part by the simple negligence, fault or other misconduct, other than intentional or grossly negligent conduct, of any of the Released Parties or of other volunteers.

I understand and acknowledge that by this Release I knowingly assume the risk of injury, harm and loss associated with the Activities. I also understand that the Released Parties do not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance in the event of injury, illness, death or property damage.

Medical Treatment. I, the Volunteer, do hereby release and forever discharge the Released Parties from any claim or action whatsoever which arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with my Activities with any of the Released Parties.

Assumption of the Risk. I, the Volunteer, understand that my Activities may include work that may be hazardous to me, including, but not limited to, the following: construction; loading and unloading; travel to and from the work sites; and exposure to lead, asbestos, and mold, which may cause or worsen certain illnesses, especially if I do not wear protective equipment, am exposed for extended periods of time, or have a pre-existing immune system deficiency.

I also understand there is some inherent risk in consuming local foods and living in local accommodations in the city(ies) or country(ies) visited. I further understand I may be traveling to and from locations where there is a risk of terrorism, war, insurrection, criminal activities, inclement weather or other circumstances that could threaten my health or safety. I also understand that it is the policy of the Released Parties to not pay ransom or make any other payments to secure the release of hostages.

I hereby expressly and specifically assume the risk of injury or harm in the Activities and release the Released Parties from all liability for any loss, cost, expense, injury, illness, death or property damage resulting directly or indirectly from the Activities.

Insurance. I, the Volunteer, understand that, except as otherwise agreed to by the Released Parties in writing, the Released Parties are under no obligation to provide, carry or maintain health, medical, travel, disability or other insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own health, medical, travel, disability or other insurance coverage.

Photographic Release. I, the Volunteer, do hereby grant and convey unto Habitat for Humanity International, Inc., all right, title and interest in any and all photographs and video or audio recordings of or including my image or voice, made by any of the Released Parties during my Activities with the Released Parties, including, but not limited to, the right to use such photographs or recordings for any purpose and to any royalties, proceeds or other benefits derived from them.

Other. I, the Volunteer, expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the state where the Activities take place. I further agree that in the event any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining clauses or provisions of this Release, which shall continue to be enforceable. Further, a waiver of a right under this Release does not prevent the exercise of any other right.

This Release is applicable for one year from the date it is signed. To express my understanding of and agreement with this Release, I sign here with a witness.

Volunteer Name (please print): _____ **Date executed:** _____

Volunteer Signature: _____

****My signature indicates my authorization for any confidential background check that may be completed by an authorized HFH/7RM agent.**

Street Address: _____

City, State, Zip: _____

Phone: (H) _____ (W) _____ (C) _____

E-mail: _____ Date of Birth: _____

****Note: By providing your email address, you give Habitat permission to include your email in e-newsletter distributions.**

In case of emergency, please contact:

Name: _____ Relation: _____ Phone: _____

Witness: Name (please print): _____

Signature: _____ **Date executed:** _____

New literature as of July 2011. Updated January 2016. This document will be kept and maintained at the Habitat for Humanity / 7 Rivers Maine office for 6 years.